

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
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Date Received
Official Use Only
FAIR POLITICAL
PRACTICES COMMISSION
10 MAR 25 AM 11:56

Please type or print in ink.

NAME (LAST)	(FIRST)	(MIDDLE)	DAYTIME TELEPHONE NUMBER	
Berryhill	Tom			
MAILING ADDRESS (Business Address Acceptable)	STREET	CITY	STATE	ZIP CODE
			OPTIONAL: E-MAIL ADDRESS	

1. Office, Agency, or Court

Name of Office, Agency, or Court:

State Assembly

Division, Board, District, if applicable:

District 25

Your Position:

Assemblyman

► If filing for multiple positions, list additional agency(ies)/ position(s): (Attach a separate sheet if necessary.)

Agency: _____

Position: _____

2. Jurisdiction of Office (Check at least one box)

☒ State

☐ County of _____

☐ City of _____

☐ Multi-County _____

☐ Other _____

3. Type of Statement (Check at least one box)

☐ Assuming Office/Initial Date: ____/____/____

☒ Annual: The period covered is January 1, 2009, through December 31, 2009.

-or-

☐ The period covered is ____/____/____, through December 31, 2009.

☐ Leaving Office Date Left: ____/____/____ (Check one)

☐ The period covered is January 1, 2009, through the date of leaving office.

-or-

☐ The period covered is ____/____/____, through the date of leaving office.

☐ Candidate Election Year: _____

4. Schedule Summary

► Total number of pages including this cover page: 2

► Check applicable schedules or "No reportable interests."

I have disclosed interests on one or more of the attached schedules:

Schedule A-1 ☐ Yes – schedule attached
Investments (Less than 10% Ownership)

Schedule A-2 ☐ Yes – schedule attached
Investments (10% or Greater Ownership)

Schedule B ☐ Yes – schedule attached
Real Property

Schedule C ☐ Yes – schedule attached
Income, Loans, & Business Positions (Income Other than Gifts and Travel Payments)

Schedule D ☒ Yes – schedule attached
Income – Gifts

Schedule E ☐ Yes – schedule attached
Income – Travel Payments

-or-

☐ No reportable interests on any schedule

5. Verification

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 3-23-10

Signature _____

EB

SCHEDULE D Income – Gifts

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION AMENDMENT

NAME OF SOURCE Plains Exploration and Production Company ADDRESS (Business Address Acceptable) 5640 S. Fairfax Avenue, Los Angeles, CA 90056 BUSINESS ACTIVITY, IF ANY, OF SOURCE		
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
9 / 9 / 09	\$ 148.60	Dinner
	\$	
	\$	

NAME OF SOURCE ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF SOURCE		
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
	\$	
	\$	
	\$	

NAME OF SOURCE ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF SOURCE		
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
	\$	
	\$	
	\$	

NAME OF SOURCE ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF SOURCE		
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
	\$	
	\$	
	\$	

NAME OF SOURCE ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF SOURCE		
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
	\$	
	\$	
	\$	

Verification Print Name _____ Office, Agency or Court _____ Statement Type <input type="checkbox"/> 2009/2010 Annual <input type="checkbox"/> Assuming <input type="checkbox"/> Leaving <input type="checkbox"/> (yr) Annual <input type="checkbox"/> Candidate I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct. Date Signed _____ Signature _____		
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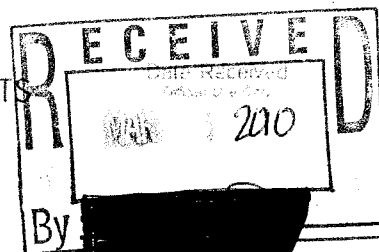
Comments: _____



STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

A Public Document



Please type or print in ink.

NAME (Last)	FIRST	MIDDLE	DATE TIME TELEPHONE NUMBER
BERRYHILL	THOMAS	C	[redacted]
ADDRESS (Street)	CITY	STATE	ZIP CODE
[redacted]	[redacted]	[redacted]	[redacted]
OPTIONAL E-MAIL ADDRESS			

1. Office, Agency, or Court

Name of Office, Agency, or Court

STATE ASSEMBLY

Division, Board, District, if applicable

DISTRICT 25

Your Position

ASSEMBLY MEMBER

► If filing for multiple positions, list additional agency(ies)/position(s). (Attach a separate sheet if necessary.)

Agency: CALIF. STATE SENATE DIST 14

Position: CANDIDATE

2. Jurisdiction of Office (Check at least one box)

☒ State☐ County of _____☐ City of _____☐ Multi-County _____☐ Other: _____

3. Type of Statement (Check at least one box)

☐ Assuming Office/Initial Date: ____/____/____☒ Annual: The period covered is January 1, 2009 through December 31, 2009

-Or-

☐ The period covered is ____/____/____ through December 31, 2009☐ Leaving Office: Date left: ____/____/____ (Check one)☐ The period covered is January 1, 2009 through the date of leaving office

-Or-

☐ The period covered is ____/____/____ through the date of leaving office☒ Candidate: Election Year: 2010

4. Schedule Summary

► Total number of pages including this cover page: 11

► Check applicable schedules or "No reportable interests."

I have disclosed interests on one or more of the attached schedules:

Schedule A-1 ☒ Yes - schedule attached
Investments (less than 10% Ownership)Schedule A-2 ☒ Yes - schedule attached
Investments (10% or Greater Ownership)Schedule B ☒ Yes - schedule attached
Real PropertySchedule C ☒ Yes - schedule attached
Income, Loans, & Business Positions (Income Other than Div. and Capital Payments)Schedule D ☒ Yes - schedule attached
Income - GiftsSchedule E ☐ Yes - schedule attached
Income - Gifts - Travel Payments

-Or-

☐ No reportable interests on any schedule

5. Verification

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed

Signature

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION Name BERRYHILL, THOMAS C

NAME OF BUSINESS ENTITY
CHESAPEAKE ENERGY CORP

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
UTILITIES

FAIR MARKET VALUE
☒ \$2,500 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☒ Stock ☐ Other _____ (Describe)
☐ Partnership ☐ Income of \$0 - \$500 ☐ Income Received of \$500 or More (Report in Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/09 2/11/09
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY
BERKSHIRE HATHAWAY, B

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
HOLDING CO

FAIR MARKET VALUE
☐ \$2,500 - \$10,000 ☒ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☒ Stock ☐ Other _____ (Describe)
☐ Partnership ☐ Income of \$0 - \$500 ☐ Income Received of \$500 or More (Report in Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/09 _____/_____/09
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY
CONSOL ENERGY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
UTILITIES

FAIR MARKET VALUE
☒ \$2,500 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☒ Stock ☐ Other _____ (Describe)
☐ Partnership ☐ Income of \$0 - \$500 ☐ Income Received of \$500 or More (Report in Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/09 2/11/09
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY
CIMAREX ENERGY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
UTILITIES

FAIR MARKET VALUE
☒ \$2,500 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☒ Stock ☐ Other _____ (Describe)
☐ Partnership ☐ Income of \$0 - \$500 ☐ Income Received of \$500 or More (Report in Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/09 2/11/09
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY
FAIRFAX FINANCIAL HLDG SUB VTG

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
INVESTMENTS

FAIR MARKET VALUE
☐ \$2,500 - \$10,000 ☒ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☒ Stock ☐ Other _____ (Describe)
☐ Partnership ☐ Income of \$0 - \$500 ☐ Income Received of \$500 or More (Report in Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/09 2/11/09
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY
GENERAL AMERICAN INV CO

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
INVESTMENTS

FAIR MARKET VALUE
☐ \$2,500 - \$10,000 ☒ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☒ Stock ☐ Other _____ (Describe)
☐ Partnership ☐ Income of \$0 - \$500 ☐ Income Received of \$500 or More (Report in Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/09 2/11/09
 ACQUIRED DISPOSED

Comments: _____

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

(Do not attach brokerage or financial statements)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION Name BERRYHILL THOMAS C

▶ NAME OF BUSINESS ENTITY
LIBERTY MEDIA HOLDING SR A INTL

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
COMMUNICATIONS

FAIR MARKET VALUE
☒ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☒ Stock ☐ Other _____
☐ Partnership ☐ Income of \$0 - \$500 ☐ Income Received of \$500 or More (Report on Schedule D)

IF APPLICABLE, LIST DATE
 _____, 09 2, 11, 09
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
LIBERTY MEDIA HLDG CAP SER A

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
LENDER

FAIR MARKET VALUE
☒ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☒ Stock ☐ Other _____
☐ Partnership ☐ Income of \$0 - \$500 ☐ Income Received of \$500 or More (Report on Schedule D)

IF APPLICABLE, LIST DATE
 _____, 09 2, 11, 09
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE
☐ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☐ Other _____
☐ Partnership ☐ Income of \$0 - \$500 ☐ Income Received of \$500 or More (Report on Schedule D)

IF APPLICABLE, LIST DATE
 _____, 09 _____, 09
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE
☐ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☐ Other _____
☐ Partnership ☐ Income of \$0 - \$500 ☐ Income Received of \$500 or More (Report on Schedule D)

IF APPLICABLE, LIST DATE
 _____, 09 _____, 09
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE
☐ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☐ Other _____
☐ Partnership ☐ Income of \$0 - \$500 ☐ Income Received of \$500 or More (Report on Schedule D)

IF APPLICABLE, LIST DATE
 _____, 09 _____, 09
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE
☐ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☐ Other _____
☐ Partnership ☐ Income of \$0 - \$500 ☐ Income Received of \$500 or More (Report on Schedule D)

IF APPLICABLE, LIST DATE
 _____, 09 _____, 09
 ACQUIRED DISPOSED

Comments: _____

SCHEDULE A-2

Investments, Income, and Assets

of Business Entities/Trusts

(Ownership Interest is 10% or Greater)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name _____

BERRYHILL, THOMAS C

1. BUSINESS ENTITY OR TRUST

TOM BERRYHILL RANCH

Name _____

EAST TAYLOR RD CERES, CA

Address (Business Address, if different) _____

Check one:

☐ Trust, go to 2 ☒ Business entity, indicate the date below (go to 2)

GENERAL DESCRIPTION OF BUSINESS ENTITY

FARMING GRAPES AND ALMONDS

FAIR MARKET VALUE 1. ACQUIRED 2. LIST DATE

☐ \$0 - \$10,000 _____ / ____ / 09 _____ / ____ / 09

☐ \$10,001 - \$100,000 _____ / ____ / 09 _____ / ____ / 09

☒ \$100,001 - \$1,000,000 _____ / ____ / 09 _____ / ____ / 09

☐ Over \$1,000,000 _____ / ____ / 09 _____ / ____ / 09

NATURE OF INVESTMENT

☒ Sole Proprietorship ☐ Partnership ☐ _____

YOUR BUSINESS POSITION **OWNER-MANAGER**

2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

☐ \$0 - \$499 ☐ \$10,001 - \$100,000

☐ \$500 - \$1,999 ☒ OVER \$100,000

☐ \$1,000 - \$10,000

3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (attach a separate sheet if necessary)

ALLIED GRAPE GROWERS CONSTELLATION WINE

ALLDRIN BROTHERS INC

4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST

Check one box:

☐ INVESTMENT ☒ REAL PROPERTY

STANISLAUS#022-011-000#041-050-000-000

Name of Business Entity or Trust _____

Street Address or Assessor's Parcel Number of Real Property _____

FARMING GRAPES & ALMONDS CERES CA 95307

Description of Business Activity _____

City or County (include zip code) of Real Property _____

FAIR MARKET VALUE 1. ACQUIRED 2. LIST DATE

☐ \$0 - \$10,000 _____ / ____ / 09 _____ / ____ / 09

☐ \$10,001 - \$100,000 _____ / ____ / 09 _____ / ____ / 09

☐ \$100,001 - \$1,000,000 _____ / ____ / 09 _____ / ____ / 09

☒ Over \$1,000,000 _____ / ____ / 09 _____ / ____ / 09

NATURE OF INTEREST

☒ Property Owned Solely by Trust ☐ Joint ☐ Partnership

☐ Life Interest ☐ Other _____

☐ Check box if interest is held in trust, partnership, or other entity _____

Comments: **BFLP IS A PARTNER IN PAIVA BERRYHILL**

1. BUSINESS ENTITY OR TRUST

BERRYHILL FAMILY LIMITED PARTNERSHIP

Name _____

PMB344 2908 E WHITMORE STE H CERES CA 95307

Address (Business Address, if different) _____

Check one:

☐ Trust, go to 2 ☒ Business entity, indicate the date below (go to 2)

GENERAL DESCRIPTION OF BUSINESS ENTITY

FARMING ALMONDS

FAIR MARKET VALUE 1. ACQUIRED 2. LIST DATE

☐ \$0 - \$10,000 _____ / ____ / 09 _____ / ____ / 09

☐ \$10,001 - \$100,000 _____ / ____ / 09 _____ / ____ / 09

☒ \$100,001 - \$1,000,000 _____ / ____ / 09 _____ / ____ / 09

☐ Over \$1,000,000 _____ / ____ / 09 _____ / ____ / 09

NATURE OF INVESTMENT

☐ Sole Proprietorship ☒ Partnership ☐ _____

YOUR BUSINESS POSITION **PARTNER**

2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

☐ \$0 - \$499 ☐ \$10,001 - \$100,000

☐ \$500 - \$1,999 ☒ OVER \$100,000

☐ \$1,000 - \$10,000

3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (attach a separate sheet if necessary)

PAIVA BERRYHILL ORCHARDS

4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST

Check one box:

☒ INVESTMENT ☐ REAL PROPERTY

PAIVA BERRYHILL ORCHARDS

Name of Business Entity or Trust _____

Street Address or Assessor's Parcel Number of Real Property _____

FARMING ALMONDS- CHICO, CA 95973

Description of Business Activity _____

City or County (include zip code) of Real Property _____

FAIR MARKET VALUE 1. ACQUIRED 2. LIST DATE

☐ \$0 - \$10,000 _____ / ____ / 09 _____ / ____ / 09

☐ \$10,001 - \$100,000 _____ / ____ / 09 _____ / ____ / 09

☒ \$100,001 - \$1,000,000 _____ / ____ / 09 _____ / ____ / 09

☐ Over \$1,000,000 _____ / ____ / 09 _____ / ____ / 09

NATURE OF INTEREST

☐ Property Owned Solely by Trust ☐ Joint ☒ Partnership

☐ Life Interest ☐ Other _____

☐ Check box if interest is held in trust, partnership, or other entity _____

SCHEDULE A-2
Investments, Income, and Assets
of Business Entities/Trusts
 (Ownership Interest is 10% or Greater)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
 Name
BERRYHILL, THOMAS C

1. BUSINESS ENTITY OR TRUST
WOODY'S ON THE RIVER
 Name:
1912 E TAYLOR RD CERES CA 95307
 Address (Include Apt. No., Address, Apt. No.):
 City/State:
☐ Trust (go to 7) ☒ Business Entity (complete Schedule A-2 to 7)
 GENERAL DESCRIPTION OF BUSINESS ACTIVITY:
DUCK HUNTING BLIND SALES
 FAIR MARKET VALUE IF APPLICABLE (LIST DATE)
☐ \$0.00 - \$100,000
☐ \$10,001 - \$100,000
☒ \$100,001 - \$1,000,000
☐ Over \$1,000,000
 ACQUIRED 09 DISPOSED 09
 NATURE OF INVESTMENT
☐ Sole Proprietorship ☐ Partnership ☒ LLC
 YOUR BUSINESS POSITION MEMBER

2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)
☐ \$0 - \$499 ☐ \$10,001 - \$100,000
☐ \$500 - \$1,000 ☒ OVER \$100,000
☐ \$1,001 - \$10,000

3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (attach a separate sheet if necessary)
PHIL O'CONNELL GRAIN CO., INC.

4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST
 Check one box:
☐ INVESTMENT ☒ REAL PROPERTY
11751, 12625, 13499 W 8 MILE RD
 Name of Business Entity:
 Street Address or Assessor's Parcel Number of Real Property:
STOCKTON, CA 95215
 General Description of Business Activity:
 City or State and Precinct Location of Real Property:
 FAIR MARKET VALUE IF APPLICABLE (LIST DATE)
☐ \$0.00 - \$100,000
☐ \$10,001 - \$100,000
☒ \$100,001 - \$1,000,000
☐ Over \$1,000,000
 ACQUIRED 09 DISPOSED 09
 NATURE OF INTEREST
☒ Property Ownership Deed of Trust ☐ Stock ☐ Partnership
☐ Leasehold ☐ Other
☐ I have held a business interest in real property investments in real property in the past 12 months

Comments: VALUE IS FOR EACH INDIVIDUAL PARCEL

1. BUSINESS ENTITY OR TRUST
PAVA BERRYHILL ORCHARDS
 Name:
PMB314 2908 E WHITMORE STE H CERES CA 95307
 Address (Include Apt. No., Address, Apt. No.):
 City/State:
☐ Trust (go to 7) ☒ Business Entity (complete Schedule A-2 to 7)
 GENERAL DESCRIPTION OF BUSINESS ACTIVITY:
FARMING ALMONDS
 FAIR MARKET VALUE IF APPLICABLE (LIST DATE)
☐ \$0.00 - \$100,000
☐ \$10,001 - \$100,000
☒ \$100,001 - \$1,000,000
☐ Over \$1,000,000
 ACQUIRED 09 DISPOSED 09
 NATURE OF INVESTMENT
☐ Sole Proprietorship ☐ Partnership ☒ PASSTHROUGH
 YOUR BUSINESS POSITION 12.3% INTEREST THRU BFLP

2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)
☐ \$0 - \$499 ☐ \$10,001 - \$100,000
☐ \$500 - \$1,000 ☒ OVER \$100,000
☐ \$1,001 - \$10,000

3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (attach a separate sheet if necessary)

4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST
 Check one box:
☐ INVESTMENT ☒ REAL PROPERTY
13193 CARMEN LANE
 Name of Business Entity:
 Street Address or Assessor's Parcel Number of Real Property:
CHICO CA 95973
 General Description of Business Activity:
 City or State and Precinct Location of Real Property:
 FAIR MARKET VALUE IF APPLICABLE (LIST DATE)
☐ \$0.00 - \$100,000
☐ \$10,001 - \$100,000
☒ \$100,001 - \$1,000,000
☐ Over \$1,000,000
 ACQUIRED 09 DISPOSED 09
 NATURE OF INTEREST
☒ Property Ownership Deed of Trust ☐ Stock ☐ Partnership
☐ Leasehold ☐ Other
☐ I have held a business interest in real property investments in real property in the past 12 months

SCHEDULE B Interests in Real Property (including Rental Income)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name BERRYHILL, THOMAS C

▶ STREET ADDRESS OF THE DISCLOSED PARTY

City

FAIR MARKET VALUE	IF APPLICABLE, ACQ. DATE
<input type="checkbox"/> \$0 - \$10,000	
<input type="checkbox"/> \$10,001 - \$100,000	____/____/09
<input type="checkbox"/> \$100,001 - \$1,000,000	ACQUIRED DISPOSED
<input type="checkbox"/> Over \$1,000,000	

NATURE OF INTEREST

<input type="checkbox"/> Ownership/Denial of Trust	<input type="checkbox"/> Easement
<input type="checkbox"/> Leasehold	<input type="checkbox"/> _____
For recording	State

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

<input type="checkbox"/> \$0 - \$499	<input type="checkbox"/> \$500 - \$1,000	<input type="checkbox"/> \$1,001 - \$10,000
<input type="checkbox"/> \$10,001 - \$100,000	<input type="checkbox"/> OVER \$100,000	

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

▶ STREET ADDRESS OF PREVIOUS LOCATION

City

FAIR MARKET VALUE	IF APPLICABLE, ACQ. DATE
<input type="checkbox"/> \$0 - \$10,000	
<input type="checkbox"/> \$10,001 - \$100,000	____/____/09
<input type="checkbox"/> \$100,001 - \$1,000,000	ACQUIRED DISPOSED
<input type="checkbox"/> Over \$1,000,000	

NATURE OF INTEREST

<input type="checkbox"/> Ownership/Denial of Trust	<input type="checkbox"/> Easement
<input type="checkbox"/> Leasehold	<input type="checkbox"/> _____
For recording	State

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

<input type="checkbox"/> \$0 - \$499	<input type="checkbox"/> \$500 - \$1,000	<input type="checkbox"/> \$1,001 - \$10,000
<input type="checkbox"/> \$10,001 - \$100,000	<input type="checkbox"/> OVER \$100,000	

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

* You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER?

INTEREST RATE: _____ % (Rate in %/Year)

_____ % ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD

<input type="checkbox"/> \$0 - \$1,000	<input type="checkbox"/> \$1,001 - \$1,000,000
<input type="checkbox"/> \$1,001 - \$100,000	<input type="checkbox"/> OVER \$100,000
<input type="checkbox"/> Unsecured / Secured	

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER?

INTEREST RATE: _____ % (Rate in %/Year)

_____ % ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD

<input type="checkbox"/> \$0 - \$1,000	<input type="checkbox"/> \$1,001 - \$1,000,000
<input type="checkbox"/> \$1,001 - \$100,000	<input type="checkbox"/> OVER \$100,000
<input type="checkbox"/> Unsecured / Secured	

Comments: PROPERTY INTERESTS REPORTED ON SCHEDULE A-2

SCHEDULE C
Income, Loans, & Business
Positions
 (Other than Gifts and Travel Payments)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION Name BERRYHILL, THOMAS C

1. INCOME RECEIVED	1. INCOME RECEIVED
NAME OF SOURCE OF INCOME MORGAN STANLEY	NAME OF SOURCE OF INCOME AMERICAN AG CREDIT, FLCA
ADDRESS (Business Address Acceptable) 1700 STANDIFORD STE A340 MODESTO, CA 953	ADDRESS (Business Address Acceptable) PO BOX 1125 SANTA ROSA, CA 91210
BUSINESS ACTIVITY IF ANY OF SOURCE INVESTMENTS	BUSINESS ACTIVITY IF ANY OF SOURCE FARM LOANS
YOUR BUSINESS POSITION INVESTOR	YOUR BUSINESS POSITION MEMBER
GROSS INCOME RECEIVED <input type="checkbox"/> Less than \$1,000 <input checked="" type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> Over \$100,000	GROSS INCOME RECEIVED <input type="checkbox"/> Less than \$1,000 <input checked="" type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> Over \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED <input type="checkbox"/> Salary <input type="checkbox"/> Spouse's or Registered Domestic Partner's income <input type="checkbox"/> Loan repayment <input type="checkbox"/> Sales of _____ (Property, real estate, etc.) <input type="checkbox"/> Commission or <input type="checkbox"/> Rental income for vacation or other use	CONSIDERATION FOR WHICH INCOME WAS RECEIVED <input type="checkbox"/> Salary <input type="checkbox"/> Spouse's or Registered Domestic Partner's income <input type="checkbox"/> Loan repayment <input type="checkbox"/> Sales of _____ (Property, real estate, etc.) <input type="checkbox"/> Commission or <input type="checkbox"/> Rental income for vacation or other use
<input checked="" type="checkbox"/> Other DIVIDENDS AND INTEREST (Dividend)	<input checked="" type="checkbox"/> Other PATRONAGE DIVIDENDS (Dividend)

2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER	INTEREST RATE	TERM (Months/Years)
ADDRESS (Business Address Acceptable)	_____ % <input type="checkbox"/> None	_____
BUSINESS ACTIVITY IF ANY OF LENDER	SECURITY FOR LOAN	
	<input type="checkbox"/> None <input type="checkbox"/> Pledged real estate	
HIGHEST BALANCE DURING REPORTING PERIOD	<input type="checkbox"/> None <input type="checkbox"/> Pledged, _____ (Property, real estate, etc.)	
<input type="checkbox"/> Less than \$1,000	<input type="checkbox"/> Guaranty _____	
<input type="checkbox"/> \$1,001 - \$10,000	<input type="checkbox"/> Other _____ (Property, real estate, etc.)	
<input type="checkbox"/> \$10,001 - \$100,000		
<input type="checkbox"/> Over \$100,000		

Comments: _____

SCHEDULE C
Income, Loans, & Business
Positions
 (Other than Gift and Travel Payments)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION Name BERRYHILL THOMAS C

1. INCOME RECEIVED	1. INCOME RECEIVED
NAME OF SOURCE OF INCOME TOM BERRYHILL RANCH	NAME OF SOURCE OF INCOME
ADDRESS (Business Address, Apartment) 660 GEEER CT MODESTO 95354	ADDRESS (Business Address, Apartment)
BUSINESS ACTIVITY OF SOURCE OF INCOME FARMING	BUSINESS ACTIVITY OF SOURCE OF INCOME
YOUR BUSINESS POSITION MANAGER	YOUR BUSINESS POSITION
GROSS INCOME RECEIVED <input type="checkbox"/> \$0 - \$1,000 <input checked="" type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000	GROSS INCOME RECEIVED <input type="checkbox"/> \$0 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED <input type="checkbox"/> Salary <input checked="" type="checkbox"/> Spouse's or registered domestic partner's income <input type="checkbox"/> Loan repayment <input type="checkbox"/> Rent of _____ (Property for rent, etc.) <input type="checkbox"/> Commission or <input type="checkbox"/> Rental income, net less security of \$10,000 or less <input type="checkbox"/> Other _____ (Describe)	CONSIDERATION FOR WHICH INCOME WAS RECEIVED <input type="checkbox"/> Salary <input type="checkbox"/> Spouse's or registered domestic partner's income <input type="checkbox"/> Loan repayment <input type="checkbox"/> Rent of _____ (Property for rent, etc.) <input type="checkbox"/> Commission or <input type="checkbox"/> Rental income, net less security of \$10,000 or less <input type="checkbox"/> Other _____ (Describe)

2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business or terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER	INTEREST RATE	TERM (Maturity date)
ADDRESS (Business Address, Apartment)	_____ % <input type="checkbox"/> None	_____
BUSINESS ACTIVITY OF LENDER	SECURITY FOR LOAN	
	<input type="checkbox"/> None <input type="checkbox"/> Personal residence	
	<input type="checkbox"/> Real property _____ (Home address)	
	<input type="checkbox"/> Other _____ (City)	
	<input type="checkbox"/> Other _____ (City)	
PROJECT BALANCE CURRENTLY REPORTABLE PERIOD <input type="checkbox"/> \$0 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000		

Comments: _____

Name:

BERRYHILL, THOMAS C

SCHEDULE D Income – Gifts

NAME OF SOURCE
CALIF. MANUFACTURERS & TECHNOLOGY ASSN

ADDRESS (Business Address Acceptable)
1115 11TH STREET SACRAMENTO 95814

BUSINESS ACTIVITY IF ANY OF SOURCE
TRADE ASSOCIATION

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT
11 / 11 / 09	\$ 108.00	FOOD & BEVERAGE
	\$	
	\$	

NAME OF SOURCE
CALIF BEER & BEVERAGE DISTRIBUTORS

ADDRESS (Business Address Acceptable)
1415 L ST SACRAMENTO 95814

BUSINESS ACTIVITY IF ANY OF SOURCE
TRADE ASSOCIATION

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT
11 / 16 / 09	\$ 109.97	FOOD & BEVERAGE
	\$	
	\$	

NAME OF SOURCE
CALIFORNIA POULTRY FEDERATION

ADDRESS (Business Address Acceptable)
4640 SPYRES WAY STE 4 MODESTO 95356

BUSINESS ACTIVITY IF ANY OF SOURCE
TRADE ASSOCIATION

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT
03 / 03 / 09	\$ 192.14	FOOD & BEVERAGE
03 / 10 / 09	\$ 47.64	FOOD & BEVERAGE
	\$	

NAME OF SOURCE
CALIFORNIA GROCERS ASSOCIATION

ADDRESS (Business Address Acceptable)
1415 L ST STE 410 SACRAMENTO 95814

BUSINESS ACTIVITY IF ANY OF SOURCE
TRADE ASSOCIATION

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT
03 / 31 / 09	\$ 60.63	FOOD & BEVERAGE
	\$	
	\$	

NAME OF SOURCE
CALIFORNIA TRIBAL BUSINESS ALLIANCE

ADDRESS (Business Address Acceptable)
1530 J ST SUITE 250 SACRAMENTO 95814

BUSINESS ACTIVITY IF ANY OF SOURCE
TRIBAL BUSINESS ALLIANCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT
1 / 14 / 09	\$ 88.77	FOOD & BEVERAGE
	\$	
	\$	

NAME OF SOURCE
CALIFORNIA CATTLEMANS ASSOCIATION

ADDRESS (Business Address Acceptable)
1221 H STREET SACRAMENTO 95814

BUSINESS ACTIVITY IF ANY OF SOURCE
TRADE ASSOCIATION

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT
3 / 23 / 09	\$ 50.00	FOOD & BEVERAGE
3 / 24 / 09	\$ 20.00	HAT
3 / 24 / 09	\$ 20.00	BREAKFAST

Comments:

SCHEDULE D Income - Gifts

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name BERRYHILL, THOMAS C

► NAME OF SOURCE
PACIFIC GAS AND ELECTRIC
(Do Not Use Business Address, Acceptable)
1415 L ST STE 280 SACRAMENTO 95814
BUSINESS ACTIVITY, IF ANY, OF SOURCE
UTILITY

DATE (mm/dd/yyyy)	VALUE	DESCRIPTION OF GIFT(S)
3 / 02 / 09	\$ 18.1	REFRESHMENTS
	\$	
	\$	

► NAME OF SOURCE
PECHANGA BAND OF LUISENO MISSION INDIANS
(Do Not Use Business Address, Acceptable)
1415 L STREET STE 410 SACRAMENTO 95814
BUSINESS ACTIVITY, IF ANY, OF SOURCE
TRIBAL ORGANIZATION

DATE (mm/dd/yyyy)	VALUE	DESCRIPTION OF GIFT(S)
11 / 12 / 09	\$ 201.88	ROUND OF GOLF & CLUBS
	\$	
	\$	

► NAME OF SOURCE
AT&T INC AND IT'S AFFILIATES
(Do Not Use Business Address, Acceptable)
100 CAPITOL MALL ST 1700 SACRAMENTO 95814
BUSINESS ACTIVITY, IF ANY, OF SOURCE
COMMUNICATIONS

DATE (mm/dd/yyyy)	VALUE	DESCRIPTION OF GIFT(S)
7 / 11 / 09	\$ 82.50	GOLF TOURNAMENT
7 / 12 / 09	\$ 82.50	GOLF TOURNAMENT
7 / 27 / 09	\$ 15.00	SF GIANTS TICKET

► NAME OF SOURCE
THE WALT DISNEY COMPANY
(Do Not Use Business Address, Acceptable)
500 S BUENA VISTA ST BURBANK 91521
BUSINESS ACTIVITY, IF ANY, OF SOURCE
ENTERTAINMENT

DATE (mm/dd/yyyy)	VALUE	DESCRIPTION OF GIFT(S)
4 / 9 / 09	\$ 167.00	4 DAY PARK PASS
	\$	
	\$	

► NAME OF SOURCE
(Do Not Use Business Address, Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yyyy)	VALUE	DESCRIPTION OF GIFT(S)
	\$	
	\$	
	\$	

► NAME OF SOURCE
(Do Not Use Business Address, Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yyyy)	VALUE	DESCRIPTION OF GIFT(S)
	\$	
	\$	
	\$	

Comments _____

SCHEDULE D Income - Gifts

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name BERRYHILL THOMAS C

NAME OF SOURCE
FAMILY WINEMAKERS OF CALIFORNIA
ADDRESS (Business Address Acceptable)
520 CAPITOL MALL STE 260 SACRAMENTO 95814
BUSINESS ACTIVITY, IF ANY, OF SOURCE
TRADE ASSOCIATION

DATE (mm/dd/yyyy)	VALUE	DESCRIPTION OF GIFT(S)
1 / 28 / 09	\$ 72.20	FOOD & BEVERAGE
	\$	
	\$	

NAME OF SOURCE
WINE INSTITUTE
ADDRESS (Business Address Acceptable)
425 MARKET STREET STE 1000
BUSINESS ACTIVITY, IF ANY, OF SOURCE
TRADE ASSOCIATION

DATE (mm/dd/yyyy)	VALUE	DESCRIPTION OF GIFT(S)
3 / 9 / 09	\$ 59.11	FOOD & BEVERAGE
	\$	
	\$	

NAME OF SOURCE
COUNSEL FOR LEGISLATIVE EXCELLENCE
ADDRESS (Business Address Acceptable)
2150 RIVER PLAZA DR #150 SACRAMENTO 95833
BUSINESS ACTIVITY, IF ANY, OF SOURCE
LEGISLATIVE SUMMIT

DATE (mm/dd/yyyy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 1 / 09	\$ 147.01	BRIEFCASE
12 / 1 / 09	\$ 61.74	JACKET
12 / 1 / 09	\$ 59.22	CUFFLINKS

NAME OF SOURCE
COUNSEL FOR LEGISLATIVE EXCELLENCE
ADDRESS (Business Address Acceptable)
2150 RIVER PLAZA DR #150 SACRAMENTO 95833
BUSINESS ACTIVITY, IF ANY, OF SOURCE
LEGISLATIVE SUMMIT

DATE (mm/dd/yyyy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 1 / 09	\$ 8.72	GIFT BAG
	\$	
	\$	

NAME OF SOURCE
DEL MAR THOROUGHBRED CLUB
ADDRESS (Business Address Acceptable)
PO BOX 700 DEL MAR, CA 92014
BUSINESS ACTIVITY, IF ANY, OF SOURCE
HORSE RACING

DATE (mm/dd/yyyy)	VALUE	DESCRIPTION OF GIFT(S)
7 / 22 / 09	\$ 150.00	CLUB ADMISSION
7 / 22 / 09	\$ 105.00	FOOD & BEVERAGE
7 / 22 / 09	\$ 25.00	VALET PARKING

NAME OF SOURCE
PACIFIC GAS AND ELECTRIC
ADDRESS (Business Address Acceptable)
1415 L ST STE 280 SACRAMENTO 95814
BUSINESS ACTIVITY, IF ANY, OF SOURCE
UTILITY

DATE (mm/dd/yyyy)	VALUE	DESCRIPTION OF GIFT(S)
7 / 30 / 09	\$ 67.37	GOLF & BEVERAGE
7 / 2 / 09	\$ 19.63	FOOD & BEVERAGE
3 / 11 / 09	\$ 86.02	FOOD & BEVERAGE

Comments: _____